



2017 COMMUNITY GARDENING PROGRAM REGISTRATION FORM

FOR OFFICE USE ONLY:

Date Received _____

Payment _____

Garden : WS or Butler

Plot # : _____

Season Extension : YES or NO

Primary Gardener

Name _____ Date of Birth _____

Mailing Address (please include ZIP) _____

City of Bloomington Resident? (circle one) YES or NO If you are unsure of your residency status, please call 349-3700.

Primary Phone _____ Secondary Phone _____

E-mail address (primary contact) _____

* **Why is your email address important?** The e-mail address you list above will be used as our primary method of contacting you as well as the method by which The Garden Beet newsletter will reach you. Please notify Garden Staff immediately if you change your e-mail address or lose e-mail access.

If you would prefer another method of communication for primary contact, please check the box below.

☐ I do not use e-mail. Please use phone number and address listed above to contact me.

Emergency Contact

Name _____ Relation to Primary Gardener _____

Primary Phone _____ Secondary Phone _____

Community Garden	Plot Size & Type	Registration Code	Price In City	Non-City	# Plots	Total \$
Willie Streeter	Small Organic Approx. 100 sq. ft.	76501-A	\$37	\$44		
Willie Streeter	Large Organic Approx. 200 sq. ft.	76501-B	\$73	\$85		
Willie Streeter	Raised Bed Organic Approx. 32 sq. ft.	76501-C	\$37	\$44		
Willie Streeter	Large Conventional Approx. 400 sq. ft.	76501-D	\$73	\$85		
Butler	Small Organic Approx. 95 sq. ft.	76501-E	\$33	\$38		
Butler	Raised Bed Organic Approx. 32 sq. ft.	76501-F	\$33	\$38		
Butler	Large Organic Approx. 140 sq. ft.	76501-G	\$51	\$59		

Include Your Voluntary Donation	Amount
Garden Scholarship Fund	\$ _____
Bloomington Tree Fund	\$ _____
Greatest Need	\$ _____

Total Enclosed \$ _____

For your registration to be complete, your payment, this registration form and the completed CGP contract signature page must be delivered to:

COB Parks and Recreation Department
Community Gardening Program
401 N. Morton St., Ste. 250
Bloomington, IN 47404

New gardeners and returning gardeners renting a different plot(s) than they gardened in 2016 must register in person at the above address.

Returning gardeners renting the same plot(s) gardened in 2016 may mail their registration form and contract to the above address. All mail-in renewals must be received no later than 5 pm, Feb. 17.

Method of Payment:

Checks and money orders are the only accepted method of payment for mail-in plot renewal registrations. Please make checks payable to: City of Bloomington. Credit card payments for renewals are accepted in the Parks and Recreation Office.



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Additional Gardeners *(those listed here need to sign on the Contract as well.)*

Name _____ E-mail address _____

Name _____ E-mail address _____

Name _____ E-mail address _____

Additional Plots

Based on availability, interested gardeners may rent additional plots after May 1. Gardeners interested in renting additional plots should indicate number and type of plots and in what location they would like to rent in the space below. If there are plots available, the requesting gardener will be notified with options after May 1.

Garden Leaders

Garden Leaders are participating gardeners who take on a leadership role by providing support for other gardeners and coordinating garden programs, events or projects. Please check all projects in which you are interested in participating or about which you are interested in receiving more information.

- ☐ Hosting additional Garden Hours during which tools in the garden shed are available for all gardeners to use
- ☐ Coordinating Plant a Row for the Hungry donations
- ☐ Helping prepare the gardens for opening day in the spring
- ☐ Assisting with volunteer group work days
- ☐ I have a great idea about how I can help out: _____

Scholarship Information:

To ensure gardening opportunities are available to all members of the Bloomington community, financial assistance is available for those in need to help cover garden plot rental fees. Please contact Lesilyn Neely at 349-3702 or neelyl@bloomington.in.gov.

Inclusive Service Request:

Reasonable accommodations are needed to participate in above program(s) related to specific needs associated with a disability. If this is true for you, please indicate here by circling **YES** or **NO**. If you marked **YES**, please complete an Inclusion Assessment and the Inclusive Recreation Coordinator will contact you. We request at least two weeks notification for reasonable accommodations requests. *In some cases reasonable accommodations may take longer.*